U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration

Maternal and Child Health Bureau
Office of Epidemiology and Research
Division of Research

The MCH Adolescent and Young Adult Health Research Network (AYAH-RN)

Announcement Type: New, Competing Continuation **Funding Opportunity Number:** HRSA-17-090

Catalog of Federal Domestic Assistance (CFDA) No. 93.110

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2017

Application Due Date: January 6, 2017

Ensure SAM.gov and Grants.gov registrations and passwords are current immediately!

Deadline extensions are not granted for lack of registration.

Registration in all systems, including SAM.gov and Grants.gov,

may take up to one month to complete.

Issuance Date: November 2, 2016

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Authority: Social Security Act, Title V, § 501(a)(2), as amended (42 U.S.C.

701(a)(2))

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau's (MCHB) Office of Epidemiology and Research is accepting applications for fiscal year (FY) 2017 Maternal and Child Health (MCH) Adolescent and Young Adult Health Research Network (AYAH-RN).

The purpose of this cooperative agreement opportunity is to support the creation and/or maintenance of a transdisciplinary, multisite Research Network that will accelerate the translation of developmental science into MCH practice, promote scientific collaboration, and develop additional research capacity in the fields of adolescent and young adult (ages 10-25) health.

Funding Opportunity Title:	MCH Adolescent and Young Adult		
	Health Research Network (AYAH-RN)		
Funding Opportunity Number:	HRSA-17-090		
Due Date for Applications:	January 6, 2017		
Anticipated Total Annual Available Funding:	\$320,000		
Estimated Number and Type of Award(s):	Up to one (1) cooperative agreement		
Estimated Award Amount:	Up to \$320,000 per year		
Cost Sharing/Match Required:	No		
Project Period:	September 1, 2017 through August 31,		
	2022 (5 years)		
Eligible Applicants:	Eligible entities include public or nonprofit institutions of higher learning and public or private nonprofit agencies engaged in research or in programs relating to maternal and child health and/or services for children with special health care needs. Faith-based and community-based organizations, tribes, and tribal organizations meeting these requirements are eligible to apply.		
	[See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility information.]		

Application Guide

You (the applicant) are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf, except where instructed in this FOA to do otherwise. A short video explaining the *Application Guide* is available at http://www.hrsa.gov/grants/apply/applicationguide/.

Technical Assistance

MCHB will host a pre-submission technical assistance conference call for all prospective applicants on Tuesday, November 15, 2016. Call details are as follows:

Date: Tuesday, November 15, 2016

Time: 2-2:30 pm EST

Conference Number: 877-429-7311

Passcode: 2057439

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I. Program Funding Opportunity Description

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB), is accepting applications for fiscal year (FY) 2017 MCH Adolescent and Young Adult Health Research Network (AYAH-RN). Please read the entire funding opportunity announcement (FOA) carefully before completing and submitting an application.

1. Purpose

The purpose of this cooperative agreement opportunity is to support the creation and/or maintenance of a transdisciplinary, multisite Research Network that will accelerate the translation of developmental science into MCH practice, promote scientific collaboration, and develop additional research capacity in the fields of adolescent and young adult (ages 10-25) health. A Research Network is a collaboration designed to conduct research across multiple sites, resulting in a greater collective impact. One institution serves as the primary awardee, and oversees and facilitates all Network activities. The Network must include researchers who study adolescence and young adulthood from a range of disciplines, including developmental neuroscience, behavioral and social sciences, and the medical and/or allied health fields, reflecting attention to the health and development of the whole person as well as to health care services for members of these two age groups. The Network will have the following goals:

- 1) Develop and/or pursue a national research agenda that strives to:
- Accelerate the translation into practice of new and emerging research findings relating to adolescent and young adult health from developmental neuroscience and other relevant fields, such as the science of puberty, prevention, and mental and behavioral health;
- Improve access to, use of, and quality of adolescent and young adult preventive health care, including well-visits and the integration of behavioral health into primary care settings;
- Address current trends among adolescents and young adults and their implications for health care services delivery regarding topics such as: alignment with a changing health care system, the digital revolution, the changing face of substance use, and demographic trends in the racial and ethnic composition of adolescent and young adult populations;
- Develop innovative, empirically sound strategies for increasing equity in health and safety outcomes for adolescents and young adults;
- Examine the role of the primary care sector in building coordinated services for adolescents and young adults to support their healthy development and to prevent and ameliorate the marginalization of vulnerable adolescents and young adults (e.g., youth that are: neither in school nor employed; immigrant youth; youth involved in the justice system, including those re-entering the community following incarceration; youth in foster care; and youth that have aged out of the foster care system);
- Improve health outcomes in the transition from adolescence to young adulthood, and from young adulthood to full adulthood; and

- 2) Promote multisite, transdisciplinary scientific collaboration that will:
- Encourage innovative research, including the investigation of targeted screening instruments for use in primary care settings;
- Publish at least two manuscripts in peer-reviewed journals for each project year;
- Disseminate information on its activities and findings in order to inform researchers, practitioners, policy makers, adolescents and young adults and their families, educators, the public, and other stakeholders;
- Explore and strengthen collaborations with other MCHB investments and other federal agency research programs pertinent to adolescent and young adult health in order to facilitate the translation of research findings to practice and the dissemination of research findings to different audiences;
- Leverage network capacity to compete for award opportunities from other federal and private sector sources; and
- Develop additional research capacity in the field of adolescent and young adult health by fostering research and mentorship opportunities for new investigators through active communication, networking, and collaboration.

2. Background

This program is authorized by Title V of the Social Security Act, § 501(a)(2), as amended (42 U.S.C. 701(a)(2)). Adolescents and young adults aged 10 to 25 years currently comprise 22 percent of the U.S. population but account for disproportionate rates of mortality from such preventable causes as motor vehicle crashes, homicide, and suicide. Although adolescence and young adulthood are generally considered to be healthy life stages, important public health and social problems, including psychological disorders, substance use, tobacco and nicotine use, disordered conduct, and unintended pregnancy, emerge or peak during these years. Health risk behaviors, such as driving while intoxicated, unprotected sex, tobacco use, and physical inactivity may either have immediate and profound life-changing consequences for adolescents and young adults or increase their probability for developing serious chronic diseases in later adulthood.

Adolescence as a time of increased risk-taking has biological roots in the developing brain. During adolescence, increased structural connectivity between the prefrontal cortex and other areas of the brain facilitate the gradual development of important executive control and self-regulatory functions. At the same time, increases in dopaminergic activity during early adolescence give rise to changes in reward-directed activities and motivational behavior. The rapid rise in reward-seeking, combined with the slower maturation of the prefrontal cortex and its connections to other brain regions, makes adolescence a time of vulnerability to increased risk-taking in the context of relatively weak decision-making skills.

In addition, neurodevelopmental findings indicate that adolescence is a time when heightened synaptic proliferation and elimination lead to increased brain plasticity, thus providing an opportune time to intervene in both the establishment of healthy behavior patterns, and the prevention of unhealthy ones. Health risk behaviors that contribute to leading causes of morbidity and mortality are often established during childhood and adolescence, extend into adulthood, are interrelated, and are preventable. Examples of

the consequences of such risky health behaviors include unintentional and intentional injuries, drug and alcohol abuse, sexually transmitted diseases and unintended pregnancies, diseases associated with tobacco and nicotine use, illnesses resulting from inadequate physical activity, and health problems due to inadequate dietary and/or sleep patterns. Some adolescents and young adults also face specific individual and environmental challenges that add to the normally expected stresses of these developmental periods, such as chronic illnesses, psychological disorders, family dysfunction, high-risk neighborhoods, and exposure to ethnic and racial intolerance and to violence, low-achieving schools, and poverty.

Missed opportunities for disease prevention and health promotion are two gaps in our nation's health service systems for adolescents and for young adults. An integrated model, able to incorporate the contextual and social influences on adolescents and young adults as well as neuroscience and behavioral research, is a necessary framework for translating brain science into developmentally appropriate health care practice.

MCH Extramural Research Program

The MCH Adolescent and Young Adult Health Research Network (AYAH-RN), part of the MCH Extramural Research Program, is administered by the Division of Research within the Office of Epidemiology and Research of the Maternal and Child Health Bureau (MCHB). The MCH Extramural Research Program has supported groundbreaking investigations that have significantly influenced clinical management, organization and delivery of health care services, preventive care, and early intervention for the MCH population, including children and youth with special health care needs.

The MCH Extramural Research Program supports applied and translational research and research networks relating to MCH services that show promise of substantial contribution in enhancing health care services and the health and well-being of mothers, children, and families.

MCHB's intent is to ensure that research activities are responsive to the cultural and linguistic needs of special populations, that services for adolescents and young adults are accessible to consumers and engage their families in supportive roles as appropriate, and that the broadest possible representation of culturally distinct and historically underrepresented groups is supported through programs and projects sponsored by the MCHB.

HRSA also is interested in analyses of rural-urban differences, where data allow.

For more information about the MCH Extramural Research Program, visit our website: http://www.mchb.hrsa.gov/research.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New, Competing Continuation.

Funding will be provided in the form of a cooperative agreement. A cooperative agreement is an award instrument of financial assistance where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project.

As a cooperative agreement, HRSA Program involvement will include:

- Assurance of the availability of experienced HRSA/MCHB personnel or designees to participate in the planning and development of all phases of this activity;
- Review of policies and procedures established for carrying out project activities;
- Participation in meetings and regular communications with the award recipient to review mutually agreed upon goals and objectives and to assess progress;
- Facilitation of effective communication and accountability to HRSA/MCHB regarding the project, with special attention to new program initiatives and policy development that have the potential to advance the utility of the AYAH-RN;
- Assistance in establishing and maintaining federal interagency and interorganizational contacts necessary to carry out the project;
- Review of all documents and products prior to submission for publication or public dissemination; and
- Participation in project activities such as meetings, webinars, presentations, publications, and other forms of disseminating information regarding project results and activities.

The cooperative agreement recipient's responsibilities will include:

- Adherence to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds.
- Developing and maintaining a transdisciplinary network of research entities and stakeholders, including adolescents, young adults, and families, that will accelerate the translation of developmental science into MCH practice, promote scientific collaboration, and develop additional research capacity in the fields of adolescent and young adult (ages 10-25) health;
- Promoting multisite, transdisciplinary scientific collaboration that will encourage innovative research that addresses changing trends and their implications for health care services delivery among adolescents and young adults today;
- Leveraging network capacity to compete for award opportunities from other federal and private sector sources;
- Encouraging the translation into practice of new and emerging research findings from developmental neuroscience and other relevant fields;
- Examining models of how care systems can be best accessed and provided to adolescents and young adults from a variety of backgrounds, including vulnerable and underserved populations;

- Disseminating critical information and fostering continued education activities on its research findings to inform researchers, practitioners, policy makers, adolescents and young adults and their families, educators, the public, and other stakeholders;
- Developing additional research capacity in the field of adolescent and young adult health by fostering research and mentorship opportunities for new investigators through active communication, networking, and collaboration;
- Participating in an annual meeting organized by the Maternal and Child Health Bureau for its Research Network award recipients. This meeting will take place in the Washington, DC area, and will be an opportunity to share best practices, disseminate results, and discuss research priorities with MCHB leadership, staff, and stakeholders:
- Providing an electronic copy of any products supported by award funds (including guidelines, assessment tools, publications, books, pamphlets, PowerPoint presentations, curricula, videos, etc.) to be made available to the general public and to the MCH Extramural Research Program; and
- Developing a schedule of ongoing communication among Network members, and with the Project Officer.

MCHB encourages the use of web-based technology that does not require travel for inperson meetings.

2. Summary of Funding

Approximately \$320,000 is expected to be available annually to fund one (1) recipient. You may apply for a ceiling amount of up to \$320,000 per year. The actual amount available will not be determined until enactment of the final FY 2017 federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is September 1, 2017 through August 31, 2022 (5 years). Funding beyond the first year is dependent on the availability of appropriated funds for "MCH Adolescent and Young Adult Health Research Network" in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern federal monies associated with this award are subject to the Uniform Guidance 2 CFR part 200 as codified by HHS at 45 CFR part 75, which supersede the previous administrative and audit requirements and cost principles that govern federal monies.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include public or nonprofit institutions of higher learning and public or private nonprofit agencies engaged in research or in programs relating to maternal and child health and/or services for children with special health care needs. Faith-based and community-based organizations, tribes, and tribal organizations meeting these requirements are eligible to apply.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

Applications that exceed the ceiling amount of \$320,000 total costs per year will be considered non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.4* will be considered non-responsive and will not be considered for funding under this announcement.

NOTE: Multiple applications from an organization are not allowable. In addition, an individual cannot serve as Principal Investigator or Co-Investigator on more than one MCHB-funded Research Network at a time.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this FOA to apply electronically through Grants.gov. You must download the SF-424 application package associated with this FOA following the directions provided at http://www.grants.gov/applicants/apply-for-grants.html.

2. Content and Form of Application Submission

Section 4 of HRSA's <u>SF-424 Application Guide</u> provides instructions for the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the Application Guide in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in HRSA's <u>SF-424 Application Guide</u> except where instructed in the FOA to do otherwise.

See Section 8.5 of the Application Guide for the Application Completeness Checklist.

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of **80 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments including biosketches, letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of nonprofit status (if applicable) will not be counted in the page limit. **We strongly urge you to take appropriate measures to ensure your application does not exceed the specified page limit.**

Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline to be considered under the announcement.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- Where the prospective recipient is unable to attest to any of the statements in this certification, such prospective recipient shall attach an explanation to this proposal.

See Section 4.1 viii of HRSA's <u>SF-424 Application Guide</u> for additional information on this and other certifications.

Program-Specific Instructions

In addition to application requirements and instructions in Section 4 of HRSA's <u>SF-424</u> <u>Application Guide</u> (including the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract), please include the following:

i. Project Abstract

See Section 4.1.ix of HRSA's <u>SF-424 Application Guide</u>. Include the information requested at the top of the abstract. Prepare the abstract so that it is clear, accurate, concise, and without reference to other parts of the application because it is often distributed to provide information to the public and Congress. Briefly state the principal needs and problem, goals, proposed activities including target population(s), planned coordination, anticipated products, and plans for evaluation.

Abstract content:

- Clearly indicate the Principal Investigator (PI) name, title, institution, and funding opportunity announcement number.
- PROBLEM: Briefly state the principal needs and problems that are addressed by the project.
- GOAL(S) AND OBJECTIVES: Identify the major goal(s) and objectives for the project period. Typically, the goal is stated in a sentence or paragraph, and the objectives are presented in a numbered list.
- PROPOSED ACTIVITIES AND TARGET POPULATION(S): Describe the programs and activities used to attain the objectives, the target population(s) addressed, and comment on innovations and other characteristics of the proposed plan.
- COORDINATION: Describe the coordination planned with and participation of appropriate national, regional, state, and/or local health agencies, interdisciplinary professional groups and providers, and/or organizations that function as stakeholders or partners in the proposed project.
- PRODUCTS: Provide a brief description of the anticipated products of this Network, including modes of dissemination of project activities and findings.
- KEY TERMS: From Appendix A select: (a) a maximum of 10 significant content terms that describe your project, and as many (b) targeted populations and (c) age ranges as apply. Include the selected (a) content terms, (b) populations, and (c) age ranges targeted at the end of your abstract.

ii. Project Narrative

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

- A. Background and Significance
- B. Specific Goals and Objectives
- C. Project Design: Work Plan and Scientific Innovation
- D. Impact and Dissemination
- E. Resources/Capabilities
- F. Feasibility
- G. Evaluation and Technical Support Capacity

- SECTION A BACKGROUND AND SIGNIFICANCE -- Corresponds to Section V's Review Criteria #1 Need
 - In this section, you must demonstrate a thorough knowledge and understanding of the relevant background research.
 - In addition, you should demonstrate awareness of changing trends in the health care system and the adolescent and young adult population that the Research Network will address. Demonstrate how transdisciplinary research can address these issues.
 - Provide a brief literature review that discusses needs and gaps in this field. Include sociocultural determinants of health and health disparities impacting this population. Please discuss any relevant challenges and barriers to promoting the health of adolescent and young adults that the project hopes to overcome and differentiate the challenges and barriers for each age group.
 - Consistent with HRSA's mission as the access agency to provide services
 to underserved populations, as an AYAH-RN applicant you are expected to
 describe how the Network will address the needs of underserved
 populations, such as low-income, racial/ethnic minorities, marginalized
 youth, individuals who otherwise have limited access to services, and/or
 other underserved populations as defined by your proposal.
- SECTION B SPECIFIC GOALS AND OBJECTIVES -- Corresponds to Section V's Review Criteria #2 Response
 - This section of the narrative MUST include a numbered list of the planned project's specific goals and objectives to be accomplished during the funding period.
 - The project goals should be consistent with the Purpose section of this announcement, and should direct attention to the scope of expected activities listed in the Purpose section of this FOA.
 - The project's specific objectives should be succinctly stated.
 - You must submit a logic model for designing and managing your project. Include the logic model in Attachment 5 of the narrative. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this announcement, the logic model should summarize the connections between the:
 - Goals of the project;
 - Theoretical approach;
 - Inputs (e.g., organizational profile, collaborative partners, other resources);
 - Target population(s);
 - Activities;
 - Outputs (i.e., products); and
 - Outcomes (i.e., the results of the project, typically describing a change in people or systems).
 - More information on logic models may be found in Section VIII of this FOA.

 SECTION C – PROJECT DESIGN: WORK PLAN AND SCIENTIFIC INNOVATION -- Corresponds to Section V's Review Criteria #3 Evaluative Measures

1) Work Plan:

- Describe the process for developing an integrated Research Network and present a plan of proposed activities that shows progressive implementation during the 5-year project period.
- Describe the activities or steps that will be used to achieve each of the project goals.
- This section of the narrative must provide detailed descriptions of the work plan for accomplishing each of the specific objectives. You must provide sufficient technical detail to demonstrate the necessary steps to accomplish each objective, and to convey to reviewers adequate information to assess your work plan.

2) Scientific Innovation and Importance:

- Describe how the aims of the project will advance scientific knowledge, technical capability, and/or clinical practice or other services and act as a catalyst in developing methodology, treatments, practice, services, or preventive interventions that advance the field of adolescent and young adult health.
- Describe how the proposed project advances critical research and/or methodology that challenges and seeks to shift current research, practice, or service paradigms by utilizing innovative theoretical concepts, approaches or methodologies, instrumentation, or interventions.
- Describe in what ways the project proposes a novel or innovative refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions.
- Describe any novel theoretical concepts, approaches or methodologies, policies, instrumentation or interventions to be developed or used, and any advantage over existing methodologies, instrumentation, policies, or interventions.
- SECTION D -- IMPACT AND DISSEMINATION -- Corresponds to Section V's Review Criteria #4 Impact
 - 1) Public Health Impact
 - Describe the public health impact that successful completion of the proposed work plan is likely to have.
 - Describe the impact that successful completion of the proposed work plan is likely to have on care delivery strategies involved and/or the health and well-being of adolescents and young adults in the U.S.
 - Describe the extent to which study results will be national in significance.
 - Describe how the concepts, methods, technologies, treatments, services, policies, or preventive interventions that drive this field will be changed if the proposed aims are achieved.

2) Dissemination

- Include strategies for disseminating project activities and findings to the research and practice communities, as well as adolescents, young adults, and their families from culturally, linguistically, socioeconomically, and geographically (e.g. rural/urban) diverse backgrounds.
- Describe a publication (including two publications per year in peer-reviewed journals) and dissemination plan that will facilitate the transfer of Network findings to a broad audience including researchers, health and related professionals, policy makers, educators, and families.
- Include a plan to disseminate reports, products, and other project outputs so project information is provided in a usable manner to key target audiences.
- SECTION E RESOURCES/CAPABILITIES -- Corresponds to Section V's Review Criteria #5 Resources/Capabilities

This information is used to assess the capability of the organizational and personnel resources available to perform the effort proposed. NOTE: The SF-424 R&R Table of Contents Page refers to Environment as "Facilities & Other Resources." This section on "Environment" can be included as an attachment in the Other Project Information Form, box 10, or included as part of the project narrative.

1) Organizational Facilities and Resources

- Identify the facilities to be used (laboratory, clinical setting, computer lab, office, and/or other). If appropriate, indicate their capacities, pertinent capabilities, relative proximity and extent of availability to the project.
 Describe only those resources that are directly applicable to the proposed work.
- Describe how the scientific environment in which the research will be done
 contributes to the probability of success (e.g., institutional support, physical
 resources, relevant Centers, etc.). In describing the scientific environment
 in which the work will be done, discuss ways in which the proposed study
 will benefit from unique features of the scientific environment or target
 populations or will employ useful collaborative arrangements that are
 present in that environment.
- If there are multiple performance sites, describe the resources available at each site.

2) Qualifications of Research Team

- The qualifications of the research team's key personnel are assessed as part of Section V's Review Criterion 5 Resources/Capabilities. To assess the qualifications of the research team's key personnel, the following items are used: (a) Staffing Plan in Budget Narrative, and (b) Biographical Sketches of key personnel.
- Biographical sketches must follow the instructions provided in Appendix B.

- Successful creation and maintenance of a Research Network includes the
 ability to develop and maintain a transdisciplinary network of research
 entities and stakeholders that will accelerate the translation of
 developmental science into MCH practice, promote scientific collaboration,
 and develop additional research capacity in the fields of adolescent and
 young adult health. It is crucial that you describe the capacity of the PI and
 other members of the research team to accomplish this.
- You must describe the significant experience and publication record of key personnel in carrying out transdisciplinary collaborative research and related projects relating to the goals and objectives of the research network. (Competing continuation applicants: Please see the instructions under Attachment 8.)

3) Management of Network

- As appropriate, identify meaningful support and collaboration with key stakeholders and partners in planning, designing, and implementing all activities.
- Describe a plan to ensure successful collaboration with all key partners identified in the proposal.
- The application should provide documentation (letters of agreement) of participation of a transdisciplinary team that will collaborate to fulfill the goals and objectives of the research network. The letters of agreement need to describe each partner's anticipated roles in and contributions to the AYAH-RN. Letters of agreement from collaborators should be included in Attachment 2.
- In this section of the narrative, you must provide a description of the organizational plan for management of the project, including an explanation of the roles and responsibilities of transdisciplinary project personnel and collaborators.
- SECTION F -- FEASIBILITY -- Corresponds to Section V's Review Criterion 7 Program Assurances

This section addresses questions around project feasibility. Due to the competitive nature of the MCH Research Network awards and limited availability of funding, it is important that the applicant address the feasibility of conducting and completing the project as proposed.

1) Proposed Sequence or Timetable

- Provide a sequence or timetable for the project that includes the steps that will be taken to achieve each of the activities proposed during the entire project period. Use a timeline that includes each activity and identifies responsible staff.
- Provide a brief overview of the implementation schedule for each activity described in the proposal. Present the information in a succinct manner, with a brief listing of specific milestones and expected outcomes.

- 2) Resolution of Challenges
 - Discuss any challenges that are likely to be encountered in implementing the proposed work plan, and approaches that will be used to resolve such challenges.
 - Discuss alternative strategies should any of these potential challenges arise.
 - Establish feasibility by describing any strategies that will be used to address the management of any high-risk aspects of the proposed work.
 - If appropriate, describe any procedures, situations, or materials that may be hazardous to personnel, and precautions to be exercised.
 - You must anticipate potential problems and challenges that may arise in the process of establishing partnerships that are part of the work plan, and propose mechanisms for collaborative resolution. List and discuss anticipated obstacles that may be encountered and indicate how each obstacle will be overcome.
 - A list of relevant publications by the PI and other key personnel, demonstrating the research team's capacity and experience in this field, can be uploaded as Attachment 3. Please do not attach entire papers, keeping in mind the 80-page limit.
- SECTION G -- EVALUATION AND TECHNICAL SUPPORT CAPACITY --Corresponds to Section V's Review Criterion 7 Program Assurances
 - Describe a plan for performance evaluation (evaluating project progress towards its specific aims) that will contribute to continuous quality improvement of project efforts. The project performance evaluation should reflect the Goals described in Section B above, as well as the specific timeline goals set in the Proposed Sequence or Timetable under Section F above (e.g., all staff identified and trained by month four, data collection begun by month six, etc.). The purpose is to monitor ongoing processes and the progress towards the aims and objectives of the project.

REFERENCES

• Include list of references for publications and works cited in the Project Narrative following the end of the Project Narrative, not as an attachment.

NARRATIVE GUIDANCE

In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.

Narrative Section	Review Criteria
A. Background and Significance	(1) Need
B. Specific Goals and Objectives	(2) Response
C. Project Design: Work Plan and	(3) Evaluative Measures,
Scientific Innovation	
D. Impact and Dissemination	(4) Impact
E. Resources/Capabilities	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section
	should include sufficient justification to allow
	reviewers to determine the reasonableness
	of the support requested.
F. Feasibility	(7) Program Assurances
G. Evaluation and Technical	(7) Program Assurances
Support Capacity	

iii. Budget

See Section 4.1.iv of HRSA's <u>SF-424 Application Guide</u>. Please note: the directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Please follow the instructions included in the Application Guide and, *if applicable*, the additional budget instructions provided below.

Travel

The following travel is required to be included in the budget for the AYAH-RN:

The budget should reflect the travel expenses associated with participating in meetings that address MCH research efforts and other proposed trainings or workshops. All applicants must budget for attendance at the MCHB Research Network meeting each year in the Washington, DC area for up to two people (the PI and one other attendee) for two days. **Meeting attendance is an award requirement.**

Travel outside of the United States and its territories is not supported for the AYAH-RN.

Reminder: The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) incurred by the recipient to carry out a HRSA-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable.

In addition, the MCH Adolescent and Young Adult Health Research Network (AYAH-RN) requires the following:

- The maximum number of budget periods allowed is five (5). A budget period represents 12 months of project effort.
- Use the "Other Sponsored Program/ Activities" indirect cost rate. Any non-federal entity that has never received a negotiated indirect cost rate, (except a governmental department or agency unit that receives more than \$35 million in direct federal funding) may elect to charge a de minimis rate of 10 percent of modified total direct costs (MTDC) which may be used indefinitely. If chosen, this methodology once elected must be used consistently for all federal awards until such time as a non-federal entity chooses to negotiate for a rate, which the non-federal entity may apply to do at any time. See 45 CFR part 75, HHS's codification of the Uniform Guidance at http://www.ecfr.gov/cgi-bin/retrieveECFR?gp=1&SID=4d52364ec83fab994c665943dadf9cf7&ty=HTML&h=L&r=PART&n=pt45.1.75, particularly § 75.414 (f) Indirect (F&A) costs.

The Consolidated Appropriations Act, 2016, Division H, § 202, (P.L. 114-113) states, "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." Please see Section 4.1.iv Budget – Salary Limitation of HRSA's SF-424 Application Guide for additional information. Note that these or other salary limitations will apply in FY 2017, as required by law.

iv. Budget Narrative

See Section 4.1.v. of HRSA's SF-424 Application Guide.

In addition, the AYAH-RN program requires the following:

Staffing Plan and Personnel Requirements

Please refer to instructions in Section 4.1.vi of HRSA's <u>SF-424 Application Guide</u>. Include the position descriptions (roles, responsibilities, and qualifications of proposed project staff) in the Budget Narrative under Personnel costs. The budget narrative is uploaded into the Budget Narrative Attachment Form.

v. Program-Specific Forms

1) Performance Standards for Special Projects of Regional or National Significance (SPRANS) and Other MCHB Discretionary Projects

HRSA has modified its reporting requirements for SPRANS projects, Community Integrated Service Systems (CISS) projects, and other grant/cooperative agreement programs administered by MCHB to include national performance measures that were developed in accordance with the requirements of the Government Performance and Results Act (GPRA) of 1993 (Public Law 103-62). This Act requires the establishment of measurable goals for federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for states have also been established under the Block Grant provisions of Title V of the Social Security Act, MCHB's authorizing legislation. Performance measures for other MCHB-funded grant/cooperative

agreement programs have been approved by the Office of Management and Budget and are primarily based on existing or administrative data that projects should easily be able to access or collect. An electronic system for reporting these data elements has been developed and is now available.

2) Performance Measures for the MCH Adolescent and Young Adult Health Research Network (AYAH-RN)

To inform successful applicants of their reporting requirements, the listing of MCHB administrative forms and performance measures for this program can be found in Section "VI. Award Administration Information" of this FOA.

NOTE: The performance measures and data collection information is for your PLANNING USE ONLY. These forms are not to be included as part of this application.

vi. Attachments

Please provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Each attachment must be clearly labeled**.

Attachment 1: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying key positions. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch. Given the 80-page limit, it is recommended that biographical sketches be no more than five pages in length per person.

Attachment 2: Letters of Agreement/Letters of Support

Provide any documents that describe working relationships between your agency and other agencies and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the collaborators and any deliverables. Include only letters of agreement that specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.). Letters of agreement must be dated.

Attachment 3: List of Key Publications by Research Team

A list of key personnel's citations for key publications that are relevant to the proposal can be included. Do not list unpublished theses, or abstracts/manuscripts **submitted** (but not yet accepted) for publication. In consideration of the 80-page limitation, include only a list of citations.

Attachment 4: Project Organizational Chart, Including Partners and Collaborators
Provide a project organizational chart that describes the functional structure of
the Network. The chart should provide the following information for key
personnel: Institution, Responsibilities/Activities.

Attachment 5: Logic Model

You must submit a logic model for designing and managing your project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. Please see section IV.ii.B of this announcement for instructions.

Attachment 6: Evidence of Non-Profit Status (Not counted in the page limit)

Attachment 7: For Multi-Year Budgets--Fifth Year Budget, (Not counted in the page limit)

After using columns (1) through (4) of the SF-424A Section B for years 1-4 of the 5-year project period, you will need to submit the budget for year 5 as an attachment. Use SF-424A Section B. See Section 4.1.iv of HRSA's <u>SF-424</u> <u>Application Guide</u>.

Attachment 8: Summary Progress Report

ACCOMPLISHMENT SUMMARY (FOR COMPETING CONTINUATIONS ONLY)

A well-planned accomplishment summary can be of great value by providing a record of accomplishments. It is an important source of material for HRSA in preparing annual reports, planning programs, and communicating programspecific accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, you are advised to include previously stated goals and objectives in your application and emphasize the progress made in attaining these goals and objectives. Because the accomplishment summary is considered when applications are reviewed and scored, competing continuation applicants who do not include an Accomplishment Summary may not receive as high a score as applicants who do. The accomplishment summary will be evaluated as part of Review Criterion 4: Impact and Review Criterion 5: Resources/Capabilities as well as to determine eligibility to receive a funding priority-See Section V.2.

The accomplishment summary should be a brief presentation of the accomplishments, in relation to the objectives of the program during the awarded project period. The report should include:

- (1) The period covered (dates).
- (2) Specific Objectives Briefly summarize the specific objectives of the project as actually funded.
- (3) Results- Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.
- (4) Impact Provide a summary of the impact of the project including the dissemination of findings through peer-reviewed publications as well as other dissemination efforts.

Attachments 9-15: Other Relevant Documents, As Necessary
Include here any other documents that are relevant to the application. All documents are included in the page limit.

3. Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the application. You must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an application or plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If you have already completed Grants.gov registration for HRSA or another federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

The Grants.gov registration process requires information in three separate systems:

- Dun and Bradstreet (http://fedgov.dnb.com/webform/pages/CCRSearch.jsp)
- System for Award Management (SAM) (https://www.sam.gov)
- Grants.gov (http://www.grants.gov/)

For further details, see Section 3.1 of HRSA's SF-424 Application Guide.

If you fail to allow ample time to complete registration with SAM or Grants.gov, you will not be eligible for a deadline extension or waiver of the electronic submission requirement.

4. Submission Dates and Times

Application Due Date

The due date for applications under this FOA is *January 6, 2017 at 11:59 P.M. Eastern Time*.

See Section 8.2.5 – Summary of e-mails from Grants.gov of HRSA's <u>SF-424 Application</u> <u>Guide</u> for additional information.

5. Intergovernmental Review

"The MCH Adolescent and Young Adult Health Research Network" is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 4.1 ii of HRSA's <u>SF-424 Application Guide</u> for additional information.

6. Funding Restrictions

You may request funding for a project period of up to 5 years, at no more than \$320,000 total cost (direct plus indirect expenses) per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

Funds under this announcement may not be used for travel outside of the U.S.

The General Provisions in Division H of the Consolidated Appropriations Act, 2016 (P.L. 114-113) apply to this program. Please see Section 4.1 of HRSA's <u>SF-424 Application</u> <u>Guide</u> for additional information. Note that these or other restrictions will apply in FY 2017, as required by law.

You are required to have the necessary policies, procedures and financial controls in place to ensure that your organization complies with the all federal funding requirements and prohibitions such as lobbying, gun control, abortion, etc. The effectiveness of these policies, procedures and controls is subject to audit.

All program income generated as a result of awarded funds must be used for approved project-related activities.

V. Application Review Information

1. Review Criteria

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist you in understanding the standards against which your application will be judged. Critical indicators have been developed for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

These criteria are the basis upon which the reviewers will evaluate the application. The entire proposal will be considered during objective review.

The review criteria are used to review and rank applications. The MCH Adolescent and Young Adult Health Research Network (AYAH-RN) has seven (7) review criteria:

Need	15 points
Response	20 points
Evaluative Measures	20 points
Impact	10 points
Resources/Capabilities	20 points
Support Requested	5 points
Program Assurances	10 points
	Response Evaluative Measures Impact Resources/Capabilities Support Requested

TOTAL: 100 points

Criterion 1: NEED (15 points) – Corresponds to Section IV's Background and Significance

The extent to which the application describes:

- The problem of a lack of science-based knowledge on practices designed to accelerate the translation of developmental science into MCH practice, promote scientific collaboration, and develop additional research capacity in the fields of adolescent and young adult health in the U.S.; and
- How transdisciplinary research efforts can serve to develop and/or pursue a
 national research agenda, leverage network capacity to compete for award
 opportunities from other federal agencies or private foundations, improve access
 to and quality of adolescent preventive health, disseminate critical information on
 its research findings, and improve the nation's capacity to conduct research on
 adolescent and young adult health.

Criterion 2: RESPONSE (20 points) – Corresponds to Section IV's Specific Goals and Objectives

- The extent to which the proposed project responds to the "<u>Purpose</u>" included in the program description.
- The clarity of the proposed goals and objectives and their relationship to the identified project.
- The extent to which the activities (scientific or other) described in the application are capable of addressing the problem and attaining the project objectives.
- The extent to which the applicant demonstrates awareness of previous work in the area of this project, including citation of relevant literature and justification of the need for the Network.
- The extent to which the goals and objectives are clear, concise, and appropriate.
- The extent to which the proposed logic model is clear.

Criterion 3: EVALUATIVE MEASURES (20 points) – Corresponds to Section IV's Project Design: Work Plan and Scientific Innovation

- The extent to which the work plan described is coherent.
- The extent to which the activities described in the proposal are capable of attaining the project objectives.
- The extent to which the overall strategies and activities described in the work plan are well-reasoned and appropriate to accomplish the aims of the project.

- The extent to which the aims of the project will advance scientific knowledge, technical capability, and/or clinical practice or other services and act as a catalyst in developing methodology, treatments, practice, services, or preventive interventions that advance the field of adolescent and young adult health.
- The extent to which the proposal describes critical research and methodology that challenges and seeks to shift current research, practice, or service paradigms by utilizing innovative theoretical concepts, approaches or methodologies, instrumentation, or interventions. The extent to which a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions is proposed.

Criterion 4: IMPACT (10 points) – Corresponds to Section IV's Impact and Dissemination

- The potential impact of the project in creating a multisite, transdisciplinary Research Network that will accelerate the translation of developmental science into MCH practice, promote scientific collaboration, and develop additional research capacity in the field of adolescent and young adult health.
- The extent to which the project will have an impact on health care delivery strategies and/or the health and wellbeing of adolescents and young adults.
- The extent to which there is an effective publication and dissemination plan to facilitate the transfer of Network findings to a broad audience including researchers, health and related professionals, policy makers, educators, and adolescents and young adults and their families.
- The extent to which the applicant has a feasible plan for meeting the expectation to produce the expected minimum number of peer-reviewed publications (i.e., at least two peer-reviewed publications per project year).
- For New Competing Applications only: the extent to which the applicant demonstrates prior impact through publications in the field of adolescent and young adult health.
- For **Competing Continuation Applications** only: the extent to which the applicant describes the impact of its current project including the dissemination of findings through at least two peer-reviewed publications per project year, as well as other dissemination efforts (Attachment 8).

Criterion 5: RESOURCES/CAPABILITIES (20 points) – Corresponds to Section IV's Resources/Capabilities and Biographical Sketches in Section IV, and Staffing Plan in Budget Narrative

The extent to which project personnel and collaborators are qualified by training and/or experience to implement and carry out the project. The extent to which the capabilities of the applicant organization and collaborators, and the quality and availability of facilities and personnel are able to fulfill the needs and requirements of the proposed project.

The PI and project team's documented history of leadership in the conduct of multisite, transdisciplinary, collaborative research and publication record addressing the health of adolescents and young adults.

- The extent to which the PI and other key personnel are well-qualified by training and/or expertise to develop the infrastructure of the research network and to accomplish the activities of the Network as described in this FOA.
- The extent to which the PI and other key personnel demonstrate current and/or past success in publishing the findings of their research.
- The extent to which the applicant has the existing resources/facilities to achieve project objectives and to successfully support the Research Network described in the proposal.
- The extent to which the applicant describes a plan to ensure successful collaboration with key partners identified in the proposal.
- For New Competing Applications only: The extent to which the PI and other key personnel demonstrate the necessary resources and capabilities that result from their prior experience and accomplishments to ensure the success of this Research Network.
- For **Competing Continuation Applications** only: the extent to which the applicant describes resources and capabilities that result from accomplishments of the current project (Attachment 8).

Criterion 6: SUPPORT REQUESTED (5 points) – Corresponds to Section IV's Budget and Budget Narrative

The reasonableness of the proposed budget for each year of the project period in relation to the objectives, the scope and complexity of the research and related activities, and the anticipated results.

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which budget line items are well described and justified in the budget justification.
- The extent to which time allocated by key personnel is appropriate to achieve project objectives.

Criterion 7: PROGRAM ASSURANCES (10 points) -- Corresponds to Section IV's Feasibility, and Evaluation and Technical Support Capacity

Once a project is funded, it is expected that it will demonstrate ongoing progress and completion as proposed and approved. It is thus important that an applicant demonstrate feasibility that the project can be completed as proposed and approved.

- The extent to which the timeline provided is clear and feasible.
- The extent to which the proposed work plan is feasible to implement within the project timeline.
- The extent to which potential barriers to project progress are anticipated and addressed.
- The extent to which plans are in place to evaluate whether the project objectives are being met according to the timeline provided.

2. Review and Selection Process

The objective review provides advice to the individuals responsible for making award decisions. The highest ranked applications receive priority consideration for award within available funding. In addition to the ranking based on merit criteria, HRSA approving officials also may apply other factors in award selection, (e.g., geographical distribution), if specified below in this FOA. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below.

Please see Section 5.3 of HRSA's SF-424 Application Guide for more details.

Funding Priorities

This program includes a funding priority. A funding priority is defined as the favorable adjustment of combined review scores of individually approved applications when applications meet specified criteria. Prior to final funding decisions, HRSA will assess all applications within the fundable range for eligibility to receive priority points. You do not need to request a funding priority. The funding factor will be determined by HRSA Staff. To minimize potential award activity disruptions and maximize the effective use of federal dollars, HRSA will award priority points to competing continuation applicants according to the criteria below.

Program Compliance (5 points):

HRSA will award 5 points if you have successfully achieved the previous award goals and objectives based on progress reports submitted during the project period and a detailed accomplishment summary (submitted with this application) describing how the objectives were implemented and achieved.

3. Assessment of Risk and Other Pre-Award Activities

The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory or other requirements (45 CFR § 75.205).

Applications receiving a favorable objective review that HRSA is considering for funding are reviewed for other considerations. These include, as applicable, cost analysis of the project/program budget, assessment of the applicant's management systems, ensuring continued applicant eligibility, and compliance with any public policy requirements, including those requiring just-in-time submissions. You may be asked to submit additional programmatic or award information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that an award will be made. Following review of all applicable information, the HRSA approving and business management officials will determine whether an award can be made, if special conditions are required, and what level of funding is appropriate.

Award decisions are discretionary and are not subject to appeal to any HRSA or HHS official or board.

Effective January 1, 2016, HRSA is required to review and consider any information about the applicant that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). An applicant may review and comment on any information about itself that a federal awarding agency previously entered. HRSA will consider any comments by the applicant, in addition to other information in FAPIIS in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in 45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants.

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS (45 CFR § 75.212).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing awards prior to the start date of September 1, 2017.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of September 1, 2017. See Section 5.4 of HRSA's <u>SF-424 Application Guide</u> for additional information.

2. Administrative and National Policy Requirements

See Section 2 of HRSA's SF-424 Application Guide.

Human Subjects Protection:

Federal regulations (45 CFR part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, recipients must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in the Code of Federal Regulations, Title 45 – Public Welfare, Part 46 – Protection of Human Subjects (45 CFR part 46), available online at http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html.

Rights in Data:

In all cases, whether HHS funded all or part of the project or program resulting in the data, the Federal Government must be given a royalty-free, nonexclusive, and irrevocable license for the Federal Government to reproduce, publish, or otherwise use the material and to authorize others to do so for federal purposes, e.g., to make it available in government-sponsored databases for use by other researchers. Additional information on the HHS Grants Policy Statement on "Rights in Data" is available online at http://www.hrsa.gov/grants/hhsgrantspolicy.pdf.

3. Reporting

On June 10, 2016, the Office of Management and Budget approved MCHB to collect new performance measures from recipients as part of its Discretionary Grant Information System (DGIS). The new performance measures reflect MCHB's strategic and priority areas including financial and demographic information, health domain and program-specific measures, and program-specific measures that highlight the unique characteristics of discretionary grant/cooperative agreement projects that are not already captured. Collectively, these data communicate the MCHB "story" to a broad range of stakeholders on the role of the Bureau in addressing the needs of maternal and child health populations. These performance data will also serve several purposes, including recipient monitoring, performance reporting, MCHB program planning, and the ability to demonstrate alignment between MCHB discretionary programs and the MCH Title V Block Grant program.

These new performance measures will allow a more accurate and detailed picture of the full scope of activities supported by MCHB-administered grant/cooperative agreement programs, while reducing the overall number of performance measures from what was previously used. The MCHB Project Officer will assign a subset of measures relevant to the program for which the recipients will report. In addition to reporting on the new performance measures, recipients will continue to provide financial and program data. The new reporting package can be reviewed at:

http://mchb.hrsa.gov/sites/default/files/mchb/Data/Discretionary_Grant_Information_System_Performance_Measure_Update.pdf.

New and continuing awards issued on or after October 1, 2016, will be required to report on the new measures. For successful competing continuation awards, recipients will report on their previous year activities (defined as those completed before October 1, 2016) using the forms and measures in DGIS as assigned in the previous FOA.

The successful applicant under this FOA must comply with Section 6 of HRSA's <u>SF-424</u> <u>Application Guide</u> and the following reporting and review activities:

- 1) **Progress Report(s)**. The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.
- 2) **Final Report Narrative.** The recipient must submit a final report narrative to HRSA after the conclusion of the project.
- 3) **Performance Reports.** HRSA has modified its reporting requirements for SPRANS projects, CISS projects, and other grant/cooperative agreement programs administered by MCHB to include national performance measures that were developed in accordance with the requirements of the Government Performance and Results Act (GPRA) of 1993 (Public Law 103-62). This Act requires the establishment of measurable goals for federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for states have also been established under the Block Grant provisions of Title V of the Social Security Act, MCHB's authorizing legislation.

a) Performance Measures and Program Data

After the NoA is released, the Project Officer will inform recipients of the administrative forms and performances measures they must report.

b) Performance Reporting Timeline

Successful applicants receiving HRSA funds will be required, within 120 days of the Notice of Award (NoA), to register in HRSA's Electronic Handbooks (EHBs) and electronically complete the program-specific data forms that are required for this award. This requirement entails the provision of budget breakdowns in the financial forms based on the award amount, the project abstract and other grant/cooperative agreement summary data as well as providing objectives for the performance measures.

Performance reporting is conducted for each year of the project period. Recipients will be required, within 120 days of the NoA, to enter HRSA's EHBs and complete the program-specific forms. This requirement includes providing expenditure data, finalizing the abstract and grant/cooperative agreement summary data as well as finalizing indicators/scores for the performance measures.

c) Project Period End Performance Reporting

Successful applicants receiving HRSA funding will be required, within 90 days from the end of the project period, to electronically complete the program-specific data forms that appear for this program. The requirement includes providing expenditure data for the final year of the project period, the project abstract and grant/cooperative agreement summary data as well as final indicators/scores for the performance measures.

4) If applicable, **Integrity and Performance Reporting.** The Notice of Award will contain a provision for integrity and performance reporting in <u>FAPIIS</u>, as required in <u>45 CFR part 75 Appendix XII</u>.

VII. Agency Contacts

You may obtain additional information regarding business, administrative, or fiscal issues related to this FOA by contacting:

Tonya Randall
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Room 10W09A
Rockville, MD 20857
Telephone: (301) 594-4259

Fax: (301) 594-6096

E-mail: trandall@hrsa.gov

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Robin L Harwood, PhD
Health Scientist
Division of Research, Office of Epidemiology and Research
Attn: MCH Adolescent and Young Adult Health Research Network
Maternal and Child Health Bureau
Health Resources and Services Administration
5600 Fishers Lane, Room 18N116
Rockville, MD 20857

Telephone: (301) 443-3888 E-mail: rharwood@hrsa.gov You may need assistance when working online to submit your application forms electronically. Always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, seven days a week, excluding federal holidays at:

Grants.gov Contact Center

Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)

E-mail: support@grants.gov

Self-Service Knowledge Base: https://grants-portal.psc.gov/Welcome.aspx?pt=Grants

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET, excluding federal holidays at:

HRSA Contact Center Telephone: (877) 464-4772 TTY: (877) 897-9910

Web: http://www.hrsa.gov/about/contact/ehbhelp.aspx

VIII. Other Information

Logic Models:

Additional information on developing logic models can be found at the following website: http://www.cdc.gov/eval/resources/.

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a timeline used during program implementation; the work plan provides the "how to" steps. Information on how to distinguish between a logic model and work plan can be found at the following website: http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf.

Technical Assistance

MCHB will host a pre-submission technical assistance conference call for all prospective applicants on Tuesday, November 15, 2016. Call details are as follows:

Date: Tuesday, November 15, 2016

Time: 2-2:30 pm EST

Conference Number: 877-429-7311

Passcode: 2057439

Relevant Websites:

MCH Research Website

http://www.mchb.hrsa.gov/research

MCHB Autism Programs Website

http://mchb.hrsa.gov/maternal-child-health-initiatives/autism

Interagency Autism Coordinating Committee

http://iacc.hhs.gov/index.shtml

Human Subjects Assurances

http://www.hhs.gov/ohrp

http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html

Making Websites Accessible: Section 508 of the Rehabilitation Act

http://www.section508.gov/

Healthy People 2020

http://www.healthypeople.gov/

IX. Tips for Writing a Strong Application

See Section 4.7 of HRSA's SF-424 Application Guide.

Appendix A: Key Terms for Project Abstracts

(a) Content Terms (maximum of 10)

Health Care Systems & Delivery

- Access to Health Care
- Capacity & Personnel
- Clinical Practice
- Health Care Quality
- Health Care Utilization
- Health Disparities
- Health Information Technology
- Home Visiting
- Innovative Programs and Promising New Practices
- Perinatal Regionalization
- Telehealth

Primary Care & Medical Home

- Adolescent Health
- Coordination of Services
- Community-Based Approaches
- Integration of Care
- Medical Home
- Oral Health
- Preconception/Interconception Health & Well-Woman Care
- Primary Care
- Well-Child Pediatric Care

Insurance & Health Care Costs

- Cost Effectiveness
- Health Care Costs
- Insurance Coverage

Prenatal/Perinatal Health & Pregnancy Outcomes

- Cesarean
- Labor & Delivery
- Low Birthweight
- Perinatal
- Postpartum
- Pregnancy
- Prenatal Care
- Preterm

Nutrition & Obesity

- Breastfeeding
- Nutrition & Diet
- Obesity & Weight
- Physical Activity

Parenting & Child Development

- Cognitive & Linguistic Development
- Fathers
- Parent-Child Relationship
- Parenting
- Physical Growth
- Social & Emotional Development

School Settings, Outcomes, & Services

- Child Care
- Early Childhood Education
- School Health Programs
- School Outcomes & Services

Screening & Health Promotion

- Early Intervention
- Illness Prevention & Health Promotion
- Immunization
- Health Education & Family Support
- Screening
- Sleep

Illness, Injury, & Death

- Emergency Care
- Infant Illness & Hospitalization
- Maternal Illness & Complications
- Mortality
- Safety & Injury Prevention
- SIDS/SUID
- Trauma & Injury

Mental/Behavioral Health & Well-being

- Bullying & Peer Relationships
- Depression
- Mental Health & Well-being
- Risk Behaviors
- Sexually Transmitted Diseases
- Smoking
- Stress
- Substance Use
- Violence & Abuse

Special Health Care Needs & Disabilities

- ADD/ADHD
- □ Asthma
- Autism
- Chronic Illness
- Developmental Disabilities
- Special Health Care Needs
- YSHCN Transition to Adulthood

Life Course & Social Determinants

- Neighborhood
- Life Course
- Social Determinants of Health

(b) Targeted Population(s) (as many as apply):

- African American
- Asian/Pacific Islander
- Hispanic/Latino
- Immigrant
- Low-income
- Native American/Alaskan Native
- Rural
- Special Health Care Needs

(c) Targeted Age Range(s) (as many as apply):

- Women's Health & Well-being (Preconception/Interconception/Parental)
- Prenatal (until 28th week of gestation)
- Perinatal (28th week of gestation to 4 weeks after birth)
- □ Infancy (1-12 months)
- □ Toddlerhood (13-35 months)
- Early Childhood (3-5 years)
- Middle Childhood (6-11 years)
- □ Adolescence (12-18 years)
- Young Adulthood (19-25 years)

Appendix B: Instructions for Biographical Sketches

Biographical sketches should be included for all key personnel on the project.

NOTE: The Biographical Sketch may not exceed five pages. Follow the instructions below. When applicable, biographical sketches should include training, language fluency, and experience working with any culturally and linguistically diverse populations that are targeted in this proposal.

Please Note: The biosketches count in the overall 80-page limit.

Professional Information

At the top of page 1, include Name, Position Title, and Education/Training including institution and location, degree, month/year degree attained, field of study. Then complete sections A, B, C, and D as described below:

Personal Statement

Briefly describe why you are well suited for your role(s) in the project described in this application. The relevant factors may include aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and your past performance in this or related fields (you may mention specific contributions to science that are not included in Section C). In addition, you may identify up to four peer-reviewed publications that specifically highlight your experience and qualifications for this project. If you wish to explain impediments to your past productivity, you may include a description of factors such as family care responsibilities, illness, disability, and active duty military service.

Positions and Honors

List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.

Contribution to Science

Briefly describe up to five of your most significant contributions to science. For each contribution, indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work. For each of these contributions, reference up to four peer-reviewed publications or other non-publication research products (can include audio or video products; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware) that are relevant to the described contribution. The description of each contribution should be no longer than one-half page including figures and citations.

Research Support

List both selected ongoing and completed research projects for the past three years (federal or non-federally-supported). Begin with the projects that are most relevant to the research proposed in the application. Briefly indicate the overall goals of the projects and responsibilities of the key person identified on the Biographical Sketch. Do not include number of person months or direct costs.

Do not confuse "Research Support" with "Other Support." Though they sound similar, these parts of the application are very different. As part of the biosketch section of the application, "Research Support" highlights your accomplishments, and those of your colleagues, as scientists. This information will be used by the reviewers in the assessment of each individual's qualifications for a specific role in the proposed project, as well as to evaluate the overall qualifications of the research team. In contrast, "Other Support" information is required for all applications that are selected to receive awards. HRSA staff will request complete and up-to-date "other support" information from you after peer review. This information will be used to check that the proposed research has not already been federally-funded.